

WATER WELL RECORD Form WWC-5 1330321

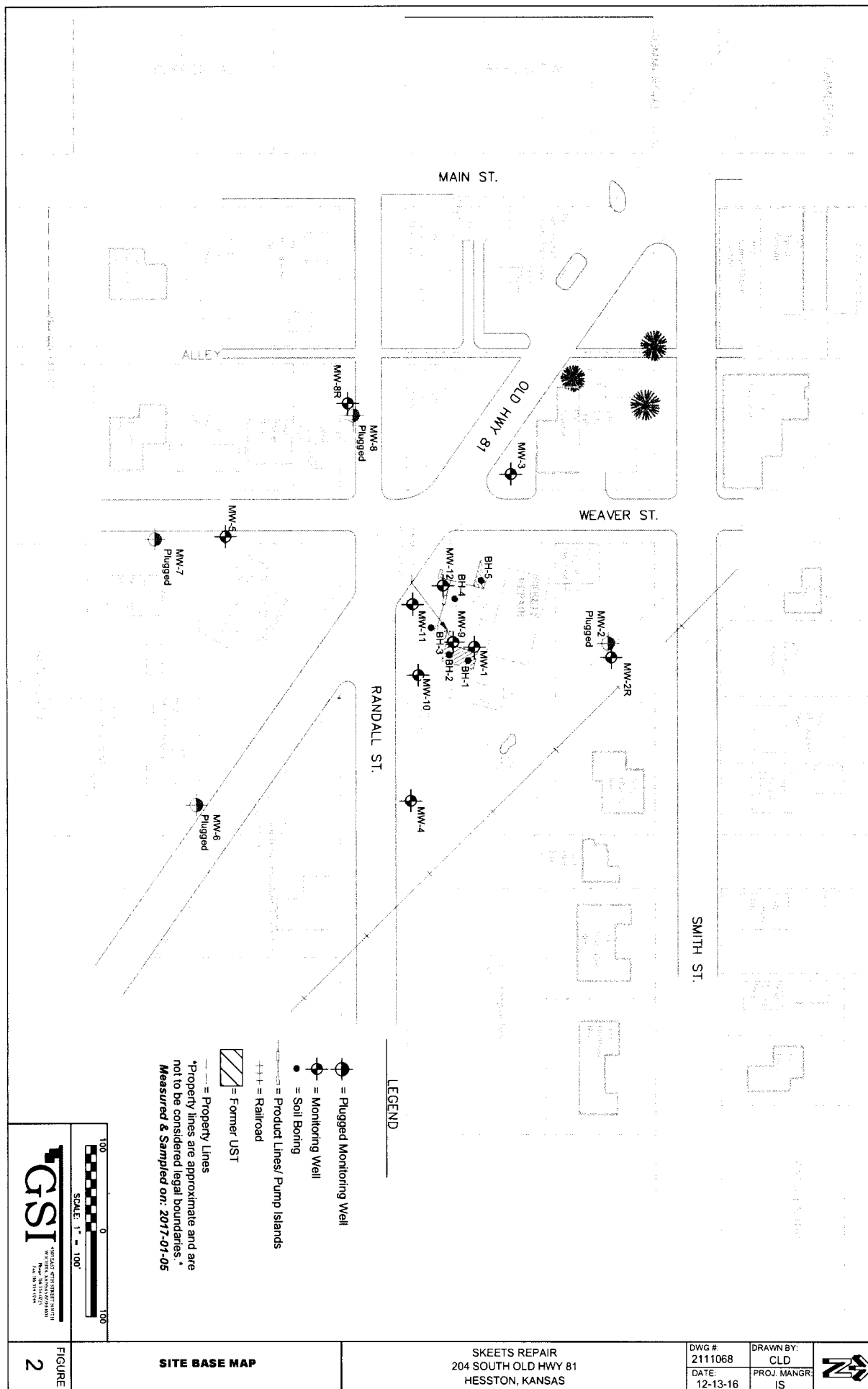
☒ Original Record ☐ Correction ☐ Change in Well Use

Division of Water
Resources App. No.

Well ID

MW-11

1 LOCATION OF WATER WELL: County: <u>Harvey</u>		Fraction <u>SE 1/4 SW 1/4 SE 1/4 NE 1/4</u>	Section Number <u>16</u>	Township Number <u>T 22 S</u>	Range Number <u>R 1</u> <input type="checkbox"/> E <input checked="" type="checkbox"/> W													
2 WELL OWNER: Last Name: _____ Business: <u>Skeets Repair, Inc.</u> Address: <u>P.O. Box 842</u> City: <u>Hesston</u> State: <u>KS</u> ZIP: <u>67062</u>		Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: <input type="checkbox"/> <u>204 S. Old Highway 81, Hesston</u>																
3 LOCATE WELL WITH "X" IN SECTION BOX: N <div style="text-align: center;"><table border="1" style="margin: auto;"><tr><td></td><td></td><td></td></tr><tr><td>-- NW --</td><td></td><td>-- NE --</td></tr><tr><td>W</td><td></td><td>X</td></tr><tr><td>-- SW --</td><td></td><td>-- SE --</td></tr><tr><td></td><td>S</td><td></td></tr></table><p>-----1 mile-----</p></div>				-- NW --		-- NE --	W		X	-- SW --		-- SE --		S		4 DEPTH OF COMPLETED WELL: <u>26</u> ft. Depth(s) Groundwater Encountered: 1) <u>26</u> ft. 2) _____ ft. 3) _____ ft. or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: <u>17.23</u> ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) <u>01/06/2017</u> <input type="checkbox"/> above land surface, measured on (mo-day-yr) _____ Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Well water was _____ ft. after _____ hours pumping _____ gpm Estimated Yield: _____ gpm Bore Hole Diameter: <u>8.25</u> in. to <u>26</u> ft. and _____ in. to _____ ft.	5 Latitude: <u>38.13761</u> (decimal degrees) Longitude: <u>97.42986</u> (decimal degrees) Datum: <input type="checkbox"/> WGS 84 <input checked="" type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 Source for Latitude/Longitude: <input type="checkbox"/> GPS (unit make/model: _____) (WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input checked="" type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper: _____	
-- NW --		-- NE --																
W		X																
-- SW --		-- SE --																
	S																	
6 Elevation: <u>1476.72</u> ft. <input type="checkbox"/> Ground Level <input checked="" type="checkbox"/> TOC Source: <input checked="" type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input type="checkbox"/> Other _____																		
7 WELL WATER TO BE USED AS:																		
<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> 1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock 2. <input type="checkbox"/> Irrigation 3. <input type="checkbox"/> Feedlot 4. <input type="checkbox"/> Industrial </div> <div style="width: 33%;"> 5. <input type="checkbox"/> Public Water Supply: well ID _____ 6. <input type="checkbox"/> Dewatering: how many wells? _____ 7. <input type="checkbox"/> Aquifer Recharge: well ID _____ 8. <input checked="" type="checkbox"/> Monitoring: well ID <u>MW-11</u> 9. Environmental Remediation: well ID _____ <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection </div> <div style="width: 33%;"> 10. <input type="checkbox"/> Oil Field Water Supply: lease _____ 11. Test Hole: well ID _____ <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical 12. Geothermal: how many bores? _____ a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water 13. <input type="checkbox"/> Other (specify): _____ </div> </div>																		
Was a chemical/bacteriological sample submitted to KDHE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, date sample was submitted: _____																		
Water well disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																		
8 TYPE OF CASING USED: <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other _____ CASING JOINTS: <input type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Threaded Casing diameter <u>2</u> in. to <u>16</u> ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft. Casing height above land surface <u>0</u> in. Weight _____ lbs./ft. Wall thickness or gauge No. <u>40</u> TYPE OF SCREEN OR PERFORATION MATERIAL: <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> Fiberglass <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> Concrete tile <input type="checkbox"/> None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: <input type="checkbox"/> Continuous Slot <input checked="" type="checkbox"/> Mill Slot <input type="checkbox"/> Gauze Wrapped <input type="checkbox"/> Torch Cut <input type="checkbox"/> Drilled Holes <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Louvered Shutter <input type="checkbox"/> Key Punched <input type="checkbox"/> Wire Wrapped <input type="checkbox"/> Saw Cut <input type="checkbox"/> None (Open Hole) SCREEN-PERFORATED INTERVALS: From <u>16</u> ft. to <u>26</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From <u>13.5</u> ft. to <u>26</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.																		
9 GROUT MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other _____ Grout Intervals: From <u>1</u> ft. to <u>13.5</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft. Nearest source of possible contamination: <input type="checkbox"/> Septic Tank <input type="checkbox"/> Lateral Lines <input type="checkbox"/> Pit Privy <input type="checkbox"/> Livestock Pens <input type="checkbox"/> Insecticide Storage <input type="checkbox"/> Sewer Lines <input type="checkbox"/> Cess Pool <input type="checkbox"/> Sewage Lagoon <input checked="" type="checkbox"/> Fuel Storage <input type="checkbox"/> Abandoned Water Well <input type="checkbox"/> Watertight Sewer Lines <input type="checkbox"/> Seepage Pit <input type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer Storage <input type="checkbox"/> Oil Well/Gas Well <input type="checkbox"/> Other (Specify) _____ Direction from well? <u>Northeast</u> Distance from well? <u>38</u> ft.																		
10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS													
0	0.4	Asphalt																
0.4	6	Ln Clay, dk brn, some snd																
6	12.5	Fat Clay, brn to gry, some snd																
12.5	24	Ln Clay, gry, with snd																
24	26	Clayey Snd, gry																
			Notes: Water was not encountered while drilling.															
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo-day-year) <u>01/04/2017</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>531</u> This Water Well Record was completed on (mo-day-year) <u>01/26/2017</u> under the business name of <u>GSI Engineering, LLC</u> Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565. Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212																		



SITE BASE MAP

SKEETS REPAIR
204 SOUTH OLD HWY 81
HESSSTON, KANSAS

DWG #
2111068
DATE:
12-13-16

DRAWN BY:
CLD
PROJ. MANGR:
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